

PATENT
Attorney Docket No. 00826-03


**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
U. S. RECEIVING OFFICE**

<i>Applicant:</i>	Richard L. Guerrant, et al.	}	<i>Customer No.</i>	34444
		}		
<i>International Serial No.</i>	PCT/US2003/032379	}	<i>Art Unit:</i>	Unknown
		}		
<i>International Filing Date:</i>	10 October 2003	}	<i>Examiner:</i>	Unknown
		}		
<i>Title:</i>	Use of Stable Glutamine Derivatives to Improve Drug Absorption			

**Certificate of Mailing Under 37 CFR §1.10
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Date: April 8, 2005


Sue Ann Carr

STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR §1.27 (a)(3)(C))

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Dear Sir:

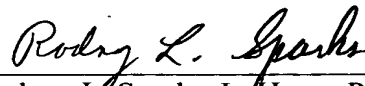
With respect to the captioned invention, I hereby state that I am an official empowered to act on behalf of the University of Virginia Patent Foundation, a nonprofit organization, and that the University of Virginia Patent Foundation is Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3)) and that the nonprofit organization identified above qualifies as a nonprofit organization, as defined in 37 CFR §1.27(a)(3)(C), for purposes of paying reduced fees under §§41(a) and (b) of Title 35, United States Code.

I hereby state that rights under contract or law remain with and have been conveyed to the University of Virginia Patent Foundation.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR §§1.27(g)(2)).

Respectfully submitted,

April 8, 2005



Rodney L. Sparks, In-House Patent Counsel
University of Virginia Patent Foundation
1224 West Main Street, Suite 1-110
Charlottesville, VA 22903
(434) 243-6103

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PTO/SB/01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number		00826-03
	First Named Inventor		GUERRANT, Richard L.
	COMPLETE IF KNOWN		
	Application Number		
	Filing Date		
	Group Art Unit		
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing		OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name			

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Use of Stable Glutamine Derivatives to Improve Drug Absorption

the specification of which ☒ is attached hereto OR ☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/418,008	10/11/2002	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
John P. Breen	38,833		
Robert J. Decker	44,056		
Robert S. MacWright	32,425		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 34444 OR ☒ Correspondence address below

Name	John P. Breen				
Address	University of Virginia Patent Foundation				
Address	1224 West Main Street, Suite 1-110				
City	Charlottesville	State	VA	ZIP	22903
Country	US	Telephone	434-924-2175	Fax	434-924-2493

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
--	------------------------

Richard L

Guerrant

Inventor's Signature				Date	10-19-03
Residence: City	Charlottesville	State	VA	Country	US
Post Office Address	2507 Northfields Road				
Post Office Address					
City	Charlottesville	State	VA	ZIP	22901
				Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
<u>Nathan M</u>		<u>Thielman</u>	
Inventor's Signature <u>Nathan M Thielman</u>		Date <u>10-06-03</u>	
Residence: City <u>Durham</u> <u>NC</u>	State <u>NC</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>4325 Klein Drive</u>			
Mailing Address			
City <u>Durham</u>	State <u>NC</u>	ZIP <u>27705</u>	Country <u>US</u>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
<u>Gerly Anne</u>		<u>de Castro Brito</u>	
Inventor's Signature		Date	
Residence: City <u>Fortaleza</u> <u>BRX</u>	State	Country <u>Brazil</u>	Citizenship <u>Brazil</u>
Mailing Address <u>Rua Republica do Libano, 710 apt 1100 - Meireles</u>			
Mailing Address			
City <u>Fortaleza, CD</u>	State	ZIP <u>60160-140</u>	Country <u>Brazil</u>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
<u>Aldo A. M.</u>		<u>Lima</u>	
Inventor's Signature <u>[Signature]</u>		Date <u>10/20/03</u>	
Residence: City <u>Fortaleza</u> <u>BRX</u>	State	Country <u>Brazil</u>	Citizenship <u>Brazil</u>
Mailing Address <u>Rua Pinho Pessoa #1289</u>			
Mailing Address <u>Apr. 1000, Aldeota</u>			
City <u>Fortaleza CE</u>	State	ZIP <u>60.000</u>	Country <u>Brazil</u>

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		Examiner Name

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Robert S. MacWright	32,425		

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Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Richard L.	Guerrant

Inventor's Signature					Date		
Residence: City	Charlottesville	State	VA	Country	US	Citizenship	US
Post Office Address	2507 Northfields Road						
Post Office Address							
City	Charlottesville	State	VA	ZIP	22901	Country	US

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Nathan M.		Thielman	
Inventor's Signature		Date	
Residence: City Durham	State NC	Country US	Citizenship US
Mailing Address 4325 Klein Drive			
Mailing Address			
City Durham	State NC	ZIP 27705	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Gerly Anne <i>Gerly Anne de Castro Brito</i>		de Castro Brito	
Inventor's Signature <i>Gerly Anne de Castro Brito</i>		Date 10/08/2003	
Residence: City Fortaleza	State CEARÁ	Country Brazil	Citizenship Brazil
Mailing Address Rua Republica do Líbano, 710 apt 1100 - Meireles			
Mailing Address			
City Fortaleza, CE	State	ZIP 60160-140	Country Brazil
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Aldo A. M. <i>[Signature]</i>		Lima	
Inventor's Signature		Date 10/08/03	
Residence: City Fortaleza	State	Country Brazil	Citizenship Brazil
Mailing Address Rua Pinho Pessoa #1289			
Mailing Address Apr. 1000, Aldeota			
City Fortaleza CE	State	ZIP 60.000	Country Brazil

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